

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application No.	09/599,997
Filing Date	June 23, 2000
First Named Inventor	KOVESDI, Imre
Group Art Unit	1636
Examiner Name	McKELVEY, T. A.
Attorney Docket No	204526

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

1. Submission required under 37 CFR 1.114

- a. ☒ Previously submitted
- i. ☒ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on May 12, 2004
(Any unentered amendment(s) referred to above will be entered.)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on
- iii. ☐ Other:
- b. ☐ Enclosed
- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Form PTO-1449
- v. ☐ Copies of References listed in Form PTO-1449
(except for U.S. patents and applications)
- vi. ☐ Other:

JUN 14 2004

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.)
- b. ☐ Applicant claims small entity status. See 37 CFR 1.27
- c. ☐ Other:

3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith.
- i. ☒ RCE fee of \$385.00 (small entity) required under 37 CFR 1.17(e)
- ii. ☐ One-month extension of time fee of \$110.00 (37 CFR 1.136 and 1.17)
- iii. ☐ Petition for an extension of time for the period noted above, as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.
- iv. ☐ Suspension of action fee of \$130.00 (37 CFR 1.17(i))
- v. ☐ Other:

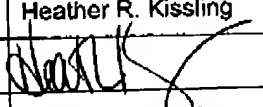
\$385.00

Total amount to be charged to Deposit Account

\$385.00

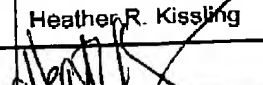
- b. ☒ The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED

Name (Print/Type)	Heather R. Kissling	Registration No. (Attorney/Agent)	45,790
Signature		Date	June 14, 2004
Address	Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)

CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this RCE Transmittal is, on the date indicated below ☒ being facsimile transmitted to the U.S. Patent and Trademark Office (703) 872-9306.

Name (Print/Type)	Heather R. Kissling	Date	June 14, 2004
Signature			

RCE Transmittal (Revised 2/28/04)

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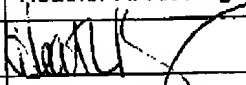
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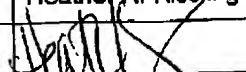
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